

| Desired Performance | Quality Target Measures | Baseline | Ballad Health | |
|---------------------|--|----------|---------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.24 | 0.24 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.21 | 0.21 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.08 | 0.04 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 2.24 | 1.69 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 2.23 | 1.49 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 7.86 | 12.92 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 4.18 | 4.40 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 6.57 | 4.49 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 1.14 | 1.20 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.45 | 0.39 |
| ↓ | CLABSI | 0.711 | 1.058 | 1.510 |
| ↓ | CAUTI | 0.558 | 0.785 | 1.227 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 2.21 | 1.75 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.73 | 3.45 |
| ↓ | MRSA | 0.047 | 0.096 | 0.153 |
| ↓ | CDIFF | 0.671 | 0.182 | 0.182 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 52.9% | 48.4% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 75.8% | 74.9% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 76.8% | 75.7% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 59.5% | 58.0% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.9% | 84.5% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 47.6% | 46.4% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 24.6% | 23.4% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 18.5% | 17.7% |
| ↓ | Sepsis In House Mortality | 10.7% | 11.9% | 12.1% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 4.15% | 5.29% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 7.93% | 7.90% |
| ↓ | Left without being seen | 0.83% | 1.73% | 2.80% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 151.9 | 170.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 365.9 | 604.7 |

| Desired Performance | Quality Target Measures | Baseline | Johnson City Medical Center | |
|---------------------|--|----------|-----------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.53 | 0.52 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.19 | 0.16 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.07 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 1.32 | 0.63 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 1.99 | 1.92 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 6.52 | 17.71 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 5.81 | 4.73 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 6.17 | 2.95 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 1.90 | 5.33 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 1.84 |
| ↓ | CLABSI | 0.711 | 2.053 | 2.005 |
| ↓ | CAUTI | 0.558 | 1.393 | 2.010 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 1.23 | 3.23 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 0.00 |
| ↓ | MRSA | 0.047 | 0.135 | 0.216 |
| ↓ | CDIFF | 0.671 | 0.280 | 0.207 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 40.0% | 38.4% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 73.8% | 73.4% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 73.8% | 72.6% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 55.2% | 54.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.3% | 83.4% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 45.9% | 44.5% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 26.6% | 31.2% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 21.3% | 21.0% |
| ↓ | Sepsis In House Mortality | 10.7% | 17.7% | 17.6% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 3.55% | 6.47% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 10.22% | 11.05% |
| ↓ | Left without being seen | 0.83% | 1.19% | 2.22% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 186.3 | 183.1 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 359.0 | 465.1 |

| Desired Performance | Quality Target Measures | Baseline | Holston Valley Medical Center | |
|---------------------|--|----------|-------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.15 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.38 | 0.22 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.07 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 1.31 | 0.83 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 1.67 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 12.12 | 6.84 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 3.12 | 3.72 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 5.87 | 3.91 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.96 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.82 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.584 | 1.215 |
| ↓ | CAUTI | 0.558 | 0.777 | 0.949 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 2.00 | 1.39 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 1.31 | 5.36 |
| ↓ | MRSA | 0.047 | 0.091 | 0.166 |
| ↓ | CDIFF | 0.671 | 0.216 | 0.241 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 53.3% | 45.0% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 72.0% | 71.0% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 76.0% | 75.9% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 60.0% | 55.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.2% | 84.2% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 46.6% | 44.1% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 20.3% | 20.8% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 16.5% | 18.3% |
| ↓ | Sepsis In House Mortality | 10.7% | 15.6% | 17.9% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 4.22% | 5.71% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 8.28% | 9.94% |
| ↓ | Left without being seen | 0.83% | 1.38% | 2.58% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 212.0 | 226.4 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 794.7 | 1096.5 |

| Desired Performance | Quality Target Measures | Baseline | Bristol Regional Medical Center | |
|---------------------|--|----------|---------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.33 | 0.17 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.08 | 0.25 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.12 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 3.96 | 5.60 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 4.66 | 5.74 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 3.59 | 16.06 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 2.97 | 6.43 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 8.24 | 4.12 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.43 | 0.00 |
| ↓ | CLABSI | 0.711 | 1.303 | 1.379 |
| ↓ | CAUTI | 0.558 | 1.282 | 1.620 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 1.30 | 1.75 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 2.78 |
| ↓ | MRSA | 0.047 | 0.153 | 0.130 |
| ↓ | CDIFF | 0.671 | 0.083 | 0.185 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 49.6% | 45.2% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 71.9% | 70.1% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 73.7% | 72.3% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 58.3% | 57.1% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.4% | 83.9% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 44.9% | 44.0% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 26.7% | 23.8% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 19.7% | 18.1% |
| ↓ | Sepsis In House Mortality | 10.7% | 12.9% | 13.1% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 4.94% | 4.02% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 10.30% | 9.15% |
| ↓ | Left without being seen | 0.83% | 2.32% | 3.01% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 183.8 | 201.5 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 390.9 | 586.6 |

| Desired Performance | Quality Target Measures | Baseline | Johnston Memorial Hospital | |
|---------------------|--|----------|----------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.32 | 0.50 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.32 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 1.38 | 1.83 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 8.93 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 10.00 | 52.63 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 2.50 | 1.71 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 20.20 | 10.99 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 1.416 | 1.535 |
| ↓ | CAUTI | 0.558 | 0.217 | 0.493 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 2.90 | 1.92 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 14.29 |
| ↓ | MRSA | 0.047 | 0.071 | 0.151 |
| ↓ | CDIFF | 0.671 | 0.074 | 0.052 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 56.0% | 44.6% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 77.2% | 72.7% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 76.2% | 74.1% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 57.3% | 54.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 86.6% | 85.7% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 46.6% | 42.6% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 27.7% | 19.5% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 18.2% | 19.9% |
| ↓ | Sepsis In House Mortality | 10.7% | 10.0% | 10.7% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 3.35% | 10.26% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 9.38% | 9.38% |
| ↓ | Left without being seen | 0.83% | 3.19% | 3.93% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 212.2 | 247.7 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 444.1 | 1087.3 |

| Desired Performance | Quality Target Measures | Baseline | Greenville Community Hospital | |
|---------------------|--|----------|-------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.28 | 0.40 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.62 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 8.39 | 2.20 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 0.00 | 0.00 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 4.81 | 4.12 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 7.63 | 0.00 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 3.56 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 1.32 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 0.483 |
| ↓ | CAUTI | 0.558 | 0.197 | 1.972 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 0.00 | 0.00 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.000 | 0.058 |
| ↓ | CDIFF | 0.671 | 0.111 | 0.180 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 29.2% | 40.4% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 73.9% | 71.6% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 76.7% | 72.8% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 61.3% | 57.4% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 83.2% | 82.0% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 45.3% | 44.3% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 21.9% | 19.1% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 14.7% | 14.1% |
| ↓ | Sepsis In House Mortality | 10.7% | 9.8% | 10.6% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 5.67% | 6.47% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 7.61% | 7.20% |
| ↓ | Left without being seen | 0.83% | 3.16% | 3.34% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 191.9 | 215.1 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 431.5 | 820.9 |

| Desired Performance | Quality Target Measures | Baseline | Norton Community Hospital | |
|---------------------|--|----------|---------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.41 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 0.00 | 4.69 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 25.00 | 0.00 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 0.00 | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 0.00 | 0.00 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 3.123 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.806 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 5.00 | 0.00 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 0.00 |
| ↓ | MRSA | 0.047 | 0.000 | 0.428 |
| ↓ | CDIFF | 0.671 | 0.000 | 0.115 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 37.7% | 48.6% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 80.1% | 73.0% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 81.8% | 76.5% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 65.6% | 59.5% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 86.1% | 83.7% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 44.3% | 42.4% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 24.6% | 28.1% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 21.7% | 17.5% |
| ↓ | Sepsis In House Mortality | 10.7% | 3.3% | 7.5% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 3.72% | 3.85% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 2.63% | 7.14% |
| ↓ | Left without being seen | 0.83% | 1.59% | 3.16% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 185.4 | 181.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 314.4 | 779.2 |

| Desired Performance | Quality Target Measures | Baseline | Sycamore Shoals Hospital | |
|---------------------|--|----------|--------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.44 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 4.99 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 0.00 | 14.93 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 0.00 | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 0.00 | 17.54 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 3.19 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 1.127 |
| ↓ | CAUTI | 0.558 | 0.607 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 3.23 | 0.00 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 0.00 |
| ↓ | MRSA | 0.047 | 0.000 | 0.081 |
| ↓ | CDIFF | 0.671 | 0.139 | 0.242 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 67.5% | 29.6% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 78.8% | 72.2% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 75.7% | 72.3% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 60.2% | 57.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.9% | 80.6% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 47.2% | 46.0% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 27.8% | 19.6% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 18.0% | 19.7% |
| ↓ | Sepsis In House Mortality | 10.7% | 5.8% | 6.8% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 5.03% | 1.74% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 5.10% | 4.65% |
| ↓ | Left without being seen | 0.83% | 1.37% | 5.03% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 160.5 | 205.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 342.3 | 573.8 |

| Desired Performance | Quality Target Measures | Baseline | Franklin Woods Community Hospital | |
|---------------------|--|----------|-----------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.52 | 0.33 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 0.00 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 15.82 | 10.64 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 8.17 | 6.12 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 10.00 | 8.06 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 2.31 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 1.339 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.536 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 3.82 | 1.46 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 0.00 |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.136 | 0.104 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 56.5% | 55.6% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 82.5% | 82.4% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 81.7% | 82.2% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 63.3% | 63.9% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 86.7% | 85.9% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 56.4% | 53.2% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 25.3% | 6.3% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 13.7% | 14.8% |
| ↓ | Sepsis In House Mortality | 10.7% | 4.2% | 5.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 3.54% | 2.67% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 8.00% | 7.29% |
| ↓ | Left without being seen | 0.83% | 3.10% | 2.71% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 182.2 | 211.6 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 378.8 | 739.6 |

| Desired Performance | Quality Target Measures | Baseline | Indian Path Community Hospital | |
|---------------------|--|----------|--------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 9.13 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 0.00 | 0.00 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 4.41 | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 0.00 | 20.41 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 0.000 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 3.23 | 6.90 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | 0.00 | 0.00 |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.602 | 0.000 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 65.5% | 48.7% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 81.7% | 79.6% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 86.4% | 79.2% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 64.8% | 62.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 83.8% | 87.6% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 52.7% | 51.3% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 16.1% | 25.0% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 25.8% | 11.2% |
| ↓ | Sepsis In House Mortality | 10.7% | 0.9% | 1.9% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 5.41% | 0.00% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.89% | 1.42% |
| ↓ | Left without being seen | 0.83% | 2.22% | 5.19% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 147.3 | 203.9 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 468.7 | 895.7 |

| Desired Performance | Quality Target Measures | Baseline | Smyth County Community Hospital | |
|---------------------|--|----------|---------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 0.00 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | 0.00 |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 0.00 | 0.00 |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 10.75 | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 0.00 | 0.00 |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 0.000 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | 0.00 | 0.00 |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.000 | 0.000 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 68.6% | 78.6% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 82.9% | 85.5% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 82.4% | 83.4% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 64.8% | 68.6% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 88.1% | 91.3% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 54.6% | 55.7% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 22.0% | 22.9% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 14.3% | 9.0% |
| ↓ | Sepsis In House Mortality | 10.7% | 5.9% | 4.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 3.57% | 3.57% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 1.19% | 2.53% |
| ↓ | Left without being seen | 0.83% | 0.86% | 1.36% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 110.2 | 131.1 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 200.9 | 354.4 |

| Desired Performance | Quality Target Measures | Baseline | Lonesome Pine Hospital | |
|---------------------|--|----------|------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 2.74 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 0.00 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 0.00 | 500.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 4.739 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.287 | 0.000 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 51.1% | 51.7% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 75.7% | 81.4% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 75.2% | 85.8% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 64.1% | 72.4% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 82.3% | 88.7% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 47.3% | 52.6% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 11.1% | 31.0% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 14.9% | 12.8% |
| ↓ | Sepsis In House Mortality | 10.7% | 9.3% | 5.4% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 2.56% | 3.03% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 2.25% | 0.83% |
| ↓ | Left without being seen | 0.83% | 0.77% | 1.58% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 134.5 | 145.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 295.3 | 457.9 |

| Desired Performance | Quality Target Measures | Baseline | Hawkins County Memorial Hospital | |
|---------------------|--|----------|----------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 0.000 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.000 | 0.000 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 72.2% | 54.2% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 81.3% | 88.4% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 82.3% | 87.9% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 48.3% | 69.7% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 88.3% | 90.0% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 49.5% | 61.1% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 45.5% | 7.1% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 9.1% | 18.8% |
| ↓ | Sepsis In House Mortality | 10.7% | 5.0% | 3.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 0.00% | 0.00% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.00% | 2.63% |
| ↓ | Left without being seen | 0.83% | 0.24% | 1.03% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 97.3 | 100.2 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 195.6 | 324.4 |

| Desired Performance | Quality Target Measures | Baseline | Russell County Hospital | |
|---------------------|--|----------|-------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | 0.00 | 0.00 |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | 0.00 | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | 0.00 | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | 0.00 | 0.00 |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | 0.00 | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 6.154 |
| ↓ | CAUTI | 0.558 | 0.000 | 0.000 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.171 | 0.244 |
| ↓ | CDIFF | 0.671 | 0.000 | 0.244 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 66.7% | 60.0% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 80.2% | 80.5% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 84.5% | 78.9% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 64.8% | 58.8% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 84.2% | 88.5% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 46.1% | 44.8% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 34.4% | 22.9% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 18.5% | 20.9% |
| ↓ | Sepsis In House Mortality | 10.7% | 5.2% | 6.8% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 5.26% | 8.16% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 2.97% | 4.71% |
| ↓ | Left without being seen | 0.83% | 0.63% | 1.13% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 117.5 | 137.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 197.9 | 226.7 |

| Desired Performance | Quality Target Measures | Baseline | Unicoi County Hospital | |
|---------------------|--|----------|------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | 0.00 |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | 0.000 | 0.000 |
| ↓ | CAUTI | 0.558 | 0.000 | 7.299 |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | 0.000 | 0.000 |
| ↓ | CDIFF | 0.671 | 0.000 | 0.000 |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 73.3% | 48.5% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 80.9% | 86.9% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 81.6% | 78.9% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 76.8% | 58.3% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 74.6% | 80.0% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 46.9% | 51.8% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 0.0% | 15.4% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 13.8% | 10.6% |
| ↓ | Sepsis In House Mortality | 10.7% | 2.2% | 2.1% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 0.00% | 0.00% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.00% | 3.64% |
| ↓ | Left without being seen | 0.83% | 0.50% | 1.69% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 126.4 | 145.0 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 275.0 | 530.9 |

| Desired Performance | Quality Target Measures | Baseline | Lee County Community Hospital | |
|---------------------|--|----------|-------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | | |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | | 0.00 |
| ↓ | CLABSI | 0.711 | | |
| ↓ | CAUTI | 0.558 | | |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | | |
| ↓ | CDIFF | 0.671 | | |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | | 53.8% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | | |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | | |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | | |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | | |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | | |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | | 33.3% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | | 33.3% |
| ↓ | Sepsis In House Mortality | 10.7% | | 0.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | | 0.00% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | | 4.76% |
| ↓ | Left without being seen | 0.83% | | 3.67% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | | 164.1 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | | 378.4 |

| Desired Performance | Quality Target Measures | Baseline | Dickenson Community Hospital | |
|---------------------|--|----------|------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | 0.00 | |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | 0.00 |
| ↓ | CLABSI | 0.711 | | |
| ↓ | CAUTI | 0.558 | | |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | | |
| ↓ | CDIFF | 0.671 | | |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 66.7% | |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 73.3% | 100.0% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 75.0% | 100.0% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 100.0% | 100.0% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 87.5% | 100.0% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 35.0% | 16.7% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | | |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 100.0% | 0.0% |
| ↓ | Sepsis In House Mortality | 10.7% | 0.0% | 0.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | | |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.00% | 0.00% |
| ↓ | Left without being seen | 0.83% | 1.03% | 1.47% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 114.8 | 124.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 133.0 | 1180.0 |

| Desired Performance | Quality Target Measures | Baseline | Hancock County Hospital | |
|---------------------|--|----------|-------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | | |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | | |
| ↓ | CLABSI | 0.711 | | |
| ↓ | CAUTI | 0.558 | | |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | | |
| ↓ | CDIFF | 0.671 | | |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 57.1% | 57.1% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 83.0% | 82.0% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 84.4% | 85.7% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 78.3% | 54.5% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 85.4% | 86.8% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 61.6% | 63.3% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | 0.0% | 20.0% |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 14.3% | 37.5% |
| ↓ | Sepsis In House Mortality | 10.7% | 8.3% | 25.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | 0.00% | 0.00% |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.00% | 0.00% |
| ↓ | Left without being seen | 0.83% | 0.43% | 0.38% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 123.7 | 134.8 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 179.4 | 230.4 |

| Desired Performance | Quality Target Measures | Baseline | Johnson County Community Hospital | |
|---------------------|--|----------|-----------------------------------|--------|
| | | | FY21 | FYTD22 |
| ↓ | PSI 3 Pressure Ulcer Rate | 1.07 | 0.00 | 0.00 |
| ↓ | PSI 6 Iatrogenic Pneumothorax Rate | 0.25 | 0.00 | 0.00 |
| ↓ | PSI 8 In Hospital Fall with Hip Fracture Rate | 0.06 | 0.00 | 0.00 |
| ↓ | PSI 9 Perioperative Hemorrhage or Hematoma Rate | 1.59 | | |
| ↓ | PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate | 0.76 | | |
| ↓ | PSI 11 Postoperative Respiratory Failure Rate | 9.24 | | |
| ↓ | PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate | 3.31 | | |
| ↓ | PSI 13 Postoperative Sepsis Rate | 3.58 | | |
| ↓ | PSI 14 Postoperative Wound Dehiscence Rate | 0.83 | | |
| ↓ | PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate | 1.18 | 0.00 | |
| ↓ | CLABSI | 0.711 | | |
| ↓ | CAUTI | 0.558 | | |
| ↓ | SSI COLON Surgical Site Infection | 2.13 | | |
| ↓ | SSI HYST Surgical Site Infection | 0.71 | | |
| ↓ | MRSA | 0.047 | | |
| ↓ | CDIFF | 0.671 | | |
| ↑ | SMB: Sepsis Management Bundle | 56.9% | 100.0% | 100.0% |
| Desired Performance | Quality Priority Measures | Baseline | FY21 | FYTD22 |
| ↑ | HCOMP1A P Patients who reported that their nurses "Always" communicated well | 84.6% | 100.0% | 100.0% |
| ↑ | HCOMP2A P Patients who reported that their doctors "Always" communicated well | 83.3% | 100.0% | 88.9% |
| ↑ | HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them | 71.0% | 100.0% | 100.0% |
| ↑ | HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home | 87.7% | 100.0% | 100.0% |
| ↑ | HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital | 54.6% | 77.8% | 77.8% |
| ↓ | READM30HF Heart Failure 30day readmissions rate | 27.7% | | |
| ↓ | READM30PN Pneumonia 30day readmission rate | 17.9% | 66.7% | 33.3% |
| ↓ | Sepsis In House Mortality | 10.7% | 0.0% | 0.0% |
| ↓ | MORT30HF Heart failure 30day mortality rate | 3.0% | | |
| ↓ | MORT30PN Pneumonia 30day mortality rate | 5.0% | 0.00% | 0.00% |
| ↓ | Left without being seen | 0.83% | 0.71% | 1.00% |
| ↓ | Median Time from ED Arrival to Departure for Outpatients (18b) | 126.0 | 95.8 | 114.5 |
| ↓ | Median Time from ED Arrival to Transport for Admitted Patients (ED1) | 223.0 | 652.6 | |